

County: Clark  
 COLONIAL CENTER  
 702 WEST DOLF STREET

Facility ID: 2270

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COLBY 54421 Phone: (715) 223-2352  
 Operated from 1/1 To 12/31 Days of Operation: 365  
 Operate in Conjunction with Hospital? No  
 Number of Beds Set Up and Staffed (12/31/01): 95  
 Total Licensed Bed Capacity (12/31/01): 95  
 Number of Residents on 12/31/01: 88

Ownership:  
 Highest Level License:  
 Operate in Conjunction with CBRF? No  
 Title 18 (Medicare) Certified? Yes  
 Title 19 (Medicaid) Certified? Yes  
 Average Daily Census: 84

Corporation  
 Skilled  
 No  
 Yes  
 Yes  
 84

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		40.9
Supp. Home Care-Personal Care	No					1 - 4 Years		22.7
Supp. Home Care-Household Services	No	Developmental Disabilities	2.3	Under 65	3.4	More Than 4 Years		36.4
Day Services	No	Mental Illness (Org./Psy)	20.5	65 - 74	9.1			-----
Respite Care	Yes	Mental Illness (Other)	1.1	75 - 84	30.7			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	48.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	3.4		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.7		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	12.5	65 & Over	96.6	-----		
Transportation	No	Cerebrovascular	13.6		-----	RNs		7.2
Referral Service	No	Diabetes	2.3	Sex	%	LPNs		3.4
Other Services	No	Respiratory	3.4		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	35.2	Male	26.1	Aides, & Orderlies		
Mentally Ill	No		-----	Female	73.9			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

	Medi care (Title 18)			Medi cal d (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care					
Level of Care	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	Total Resi- dents	% Of All
Int. Skilled Care	0	0.0	0	1	1.8	113	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.1
Skilled Care	14	100.0	311	46	83.6	96	0	0.0	0	17	100.0	145	0	0.0	0	2	100.0	300	79	89.8
Intermediate	---	---	---	8	14.5	79	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	8	9.1
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	14	100.0		55	100.0		0	0.0		17	100.0		0	0.0		2	100.0		88	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	3.8	Daily Living (ADL)	Independent			
Private Home/With Home Health	15.8	Bathing	0.0	71.6	28.4	88
Other Nursing Homes	3.2	Dressing	18.2	53.4	28.4	88
Acute Care Hospitals	3.8	Transferring	21.6	62.5	15.9	88
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	12.5	63.6	23.9	88
Rehabilitation Hospitals	70.9	Eating	46.6	47.7	5.7	88
Other Locations	2.5	*****				
Total Number of Admissions	158	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	5.7	Receiving Respiratory Care		6.8
Private Home/No Home Health	36.9	Occ/Freq. Incontinent of Bladder	60.2	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	12.1	Occ/Freq. Incontinent of Bowel	47.7	Receiving Suctioning		0.0
Other Nursing Homes	10.8			Receiving Ostomy Care		1.1
Acute Care Hospitals	7.6	Mobility		Receiving Tube Feeding		2.3
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	6.8	Receiving Mechanically Altered Diets		21.6
Rehabilitation Hospitals	7.0					
Other Locations	3.2	Skin Care		Other Resident Characteristics		
Deaths	22.3	With Pressure Sores	2.3	Have Advance Directives		31.8
Total Number of Discharges		With Rashes	10.2	Medications		
(Including Deaths)	157			Receiving Psychoactive Drugs		54.5

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## Selected Statistics: This Facility Compared to All Similar Rural Area Facilities &amp; Compared to All Facilities

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	This Facility %	Ownership: Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	88.4	80.3	1.10	85.1	1.04	84.4	1.05	84.6	1.05
Current Residents from In-County	44.3	72.7	0.61	72.2	0.61	75.4	0.59	77.0	0.58
Admissions from In-County, Still Residing	9.5	18.3	0.52	20.8	0.46	22.1	0.43	20.8	0.46
Admissions/Average Daily Census	188.1	139.0	1.35	111.7	1.68	118.1	1.59	128.9	1.46
Discharges/Average Daily Census	186.9	139.3	1.34	112.2	1.67	118.3	1.58	130.0	1.44
Discharges To Private Residence/Average Daily Census	91.7	58.4	1.57	42.8	2.14	46.1	1.99	52.8	1.74
Residents Receiving Skilled Care	90.9	91.2	1.00	91.3	1.00	91.6	0.99	85.3	1.07
Residents Aged 65 and Older	96.6	96.0	1.01	93.6	1.03	94.2	1.03	87.5	1.10
Title 19 (Medicaid) Funded Residents	62.5	72.1	0.87	67.0	0.93	69.7	0.90	68.7	0.91
Private Pay Funded Residents	19.3	18.5	1.04	23.5	0.82	21.2	0.91	22.0	0.88
Developmentally Disabled Residents	2.3	1.0	2.29	0.9	2.52	0.8	2.89	7.6	0.30
Mentally Ill Residents	21.6	36.3	0.59	41.0	0.53	39.5	0.55	33.8	0.64
General Medical Service Residents	35.2	16.8	2.10	16.1	2.19	16.2	2.17	19.4	1.81
Impaired ADL (Mean)	50.7	46.6	1.09	48.7	1.04	48.5	1.04	49.3	1.03
Psychological Problems	54.5	47.8	1.14	50.2	1.09	50.0	1.09	51.9	1.05
Nursing Care Required (Mean)	5.5	7.1	0.78	7.3	0.76	7.0	0.79	7.3	0.76